

CIVIL COVER SHEET

The JS-44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for use of the Clerk of Court for the purpose of initiating the civil docket sheet.

PLAINTIFFS

Vasek Pospisil, Anastasia Rodionova, PTPA et. al (please see attached)

DEFENDANTS

ATP Tour, Inc.; WTA Tour, Inc.; International Tennis Federation Ltd.; and
International Tennis Integrity Agency Ltd.

ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)

James W. Quinn, JW Quinn ADR LLC, 767 Fifth Avenue, Suite RP4
New York, New York 10153 (646) 465-3607

ATTORNEYS (IF KNOWN)

CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE)
(DO NOT CITE JURISDICTIONAL STATUTES UNLESS DIVERSITY)

15 U.S.C. §§ 1, et. seq. - Sherman Act

Has this action, case, or proceeding, or one essentially the same, been previously filed in SDNY at any time? No ☒ Yes ☐ (If yes, Judge Previously Assigned)

If yes, was this case Vol. ☐ Invol. ☐ Dismissed. No ☐ Yes ☐ If yes, give date _____ & Case No. _____

IS THIS AN INTERNATIONAL ARBITRATION CASE? No ☒ Yes ☐

(PLACE AN [x] IN ONE BOX ONLY)

NATURE OF SUIT

TORTS		ACTIONS UNDER STATUTES			
CONTRACT	PERSONAL INJURY	PERSONAL INJURY	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input type="checkbox"/> 110 INSURANCE	<input type="checkbox"/> 310 AIRPLANE	<input type="checkbox"/> 367 HEALTHCARE/	<input type="checkbox"/> 625 DRUG RELATED	<input type="checkbox"/> 422 APPEAL	<input type="checkbox"/> 375 FALSE CLAIMS
<input type="checkbox"/> 120 MARINE	<input type="checkbox"/> 315 AIRPLANE PRODUCT	<input type="checkbox"/> PHARMACEUTICAL PERSONAL	<input type="checkbox"/> INJURY/PRODUCT LIABILITY	<input type="checkbox"/> 28 USC 158	<input type="checkbox"/> 376 QUI TAM
<input type="checkbox"/> 130 MILLER ACT	<input type="checkbox"/> LIABILITY	<input type="checkbox"/> 365 PERSONAL INJURY	<input type="checkbox"/> SEIZURE OF PROPERTY	<input type="checkbox"/> 423 WITHDRAWAL	<input type="checkbox"/> 400 STATE
<input type="checkbox"/> 140 NEGOTIABLE	<input type="checkbox"/> 320 ASSAULT, LIBEL &	<input type="checkbox"/> PRODUCT LIABILITY	<input type="checkbox"/> 21 USC 881	<input type="checkbox"/> 28 USC 157	<input type="checkbox"/> REAPPORTIONMENT
<input type="checkbox"/> 150 INSTRUMENT	<input type="checkbox"/> SLANDER	<input type="checkbox"/> 368 ASBESTOS PERSONAL	<input type="checkbox"/> 690 OTHER		<input checked="" type="checkbox"/> 410 ANTITRUST
<input type="checkbox"/> 150 RECOVERY OF	<input type="checkbox"/> 330 FEDERAL	<input type="checkbox"/> INJURY PRODUCT			<input type="checkbox"/> 430 BANKS & BANKING
<input type="checkbox"/> OVERPAYMENT &	<input type="checkbox"/> EMPLOYERS'	<input type="checkbox"/> LIABILITY	PROPERTY RIGHTS		<input type="checkbox"/> 450 COMMERCE
<input type="checkbox"/> ENFORCEMENT	<input type="checkbox"/> LIABILITY		<input type="checkbox"/> 820 COPYRIGHTS	<input type="checkbox"/> 880 DEFEND TRADE SECRETS ACT	<input type="checkbox"/> 460 DEPORTATION
<input type="checkbox"/> 151 JUDGMENT	<input type="checkbox"/> 340 MARINE	PERSONAL PROPERTY	<input type="checkbox"/> 830 PATENT		<input type="checkbox"/> 470 RACKETEER INFLU-
<input type="checkbox"/> 151 MEDICARE ACT	<input type="checkbox"/> 345 MARINE PRODUCT	<input type="checkbox"/> 370 OTHER FRAUD	<input type="checkbox"/> 835 PATENT-ABBREVIATED NEW DRUG APPLICATION		<input type="checkbox"/> ENCED & CORRUPT
<input type="checkbox"/> 152 RECOVERY OF	<input type="checkbox"/> LIABILITY	<input type="checkbox"/> 371 TRUTH IN LENDING	<input type="checkbox"/> 840 TRADEMARK		<input type="checkbox"/> ORGANIZATION ACT
<input type="checkbox"/> DEFAULTED	<input type="checkbox"/> 350 MOTOR VEHICLE				<input type="checkbox"/> (RICO)
<input type="checkbox"/> STUDENT LOANS	<input type="checkbox"/> 355 MOTOR VEHICLE	PRISONER PETITIONS		SOCIAL SECURITY	<input type="checkbox"/> 480 CONSUMER CREDIT
<input type="checkbox"/> (EXCL VETERANS)	<input type="checkbox"/> PRODUCT LIABILITY	<input type="checkbox"/> 463 ALIEN DETAINEE	LABOR	<input type="checkbox"/> 861 HIA (1395ff)	<input type="checkbox"/> 485 TELEPHONE CONSUMER
<input type="checkbox"/> 153 RECOVERY OF	<input type="checkbox"/> 360 OTHER PERSONAL	<input type="checkbox"/> 510 MOTIONS TO	<input type="checkbox"/> 710 FAIR LABOR	<input type="checkbox"/> 862 BLACK LUNG (923)	<input type="checkbox"/> PROTECTION ACT
<input type="checkbox"/> OVERPAYMENT	<input type="checkbox"/> INJURY	<input type="checkbox"/> VACATE SENTENCE	<input type="checkbox"/> STANDARDS ACT	<input type="checkbox"/> 863 DIWC/DIWW (405(g))	<input type="checkbox"/> 490 CABLE/SATELLITE TV
<input type="checkbox"/> OF VETERAN'S	<input type="checkbox"/> 362 PERSONAL INJURY -	<input type="checkbox"/> 385 PROPERTY DAMAGE	<input type="checkbox"/> 720 LABOR/MGMT	<input type="checkbox"/> 864 SSID TITLE XVI	<input type="checkbox"/> 850 SECURITIES/
<input type="checkbox"/> BENEFITS	<input type="checkbox"/> MED MALPRACTICE	<input type="checkbox"/> PRODUCT LIABILITY	<input type="checkbox"/> RELATIONS	<input type="checkbox"/> 865 RSI (405(g))	<input type="checkbox"/> COMMODITIES/
<input type="checkbox"/> STOCKHOLDERS		PRISONER CIVIL RIGHTS	<input type="checkbox"/> 740 RAILWAY LABOR ACT		<input type="checkbox"/> EXCHANGE
<input type="checkbox"/> SUITS	ACTIONS UNDER STATUTES	<input type="checkbox"/> 463 ALIEN DETAINEE	<input type="checkbox"/> 751 FAMILY MEDICAL	FEDERAL TAX SUITS	<input type="checkbox"/> 890 OTHER STATUTORY
<input type="checkbox"/> 190 OTHER	CIVIL RIGHTS	<input type="checkbox"/> 510 MOTIONS TO	<input type="checkbox"/> 751 FAMILY MEDICAL	<input type="checkbox"/> 870 TAXES (U.S. Plaintiff or	<input type="checkbox"/> ACTIONS
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> 440 OTHER CIVIL RIGHTS	<input type="checkbox"/> 530 HABEAS CORPUS	<input type="checkbox"/> 751 FAMILY MEDICAL	<input type="checkbox"/> Defendant)	<input type="checkbox"/> 891 AGRICULTURAL ACTS
<input type="checkbox"/> 195 CONTRACT	<input type="checkbox"/> (Non-Prisoner)	<input type="checkbox"/> 535 DEATH PENALTY	<input type="checkbox"/> 751 FAMILY MEDICAL	<input type="checkbox"/> 871 IRS-THIRD PARTY	<input type="checkbox"/> 893 ENVIRONMENTAL
<input type="checkbox"/> PRODUCT		<input type="checkbox"/> 540 MANDAMUS & OTHER	<input type="checkbox"/> 751 FAMILY MEDICAL	<input type="checkbox"/> 26 USC 7609	<input type="checkbox"/> MATTERS
<input type="checkbox"/> LIABILITY	<input type="checkbox"/> 441 VOTING		<input type="checkbox"/> 751 FAMILY MEDICAL		<input type="checkbox"/> 895 FREEDOM OF
<input type="checkbox"/> 196 FRANCHISE	<input type="checkbox"/> 442 EMPLOYMENT	IMMIGRATION	<input type="checkbox"/> 751 FAMILY MEDICAL		<input type="checkbox"/> INFORMATION ACT
	<input type="checkbox"/> 443 HOUSING/	<input type="checkbox"/> 462 NATURALIZATION	<input type="checkbox"/> 751 FAMILY MEDICAL		<input type="checkbox"/> 896 ARBITRATION
REAL PROPERTY	<input type="checkbox"/> ACCOMMODATIONS	<input type="checkbox"/> APPLICATION	<input type="checkbox"/> 751 FAMILY MEDICAL		<input type="checkbox"/> 899 ADMINISTRATIVE
<input type="checkbox"/> 210 LAND	<input type="checkbox"/> 445 AMERICANS WITH	<input type="checkbox"/> 465 OTHER IMMIGRATION	<input type="checkbox"/> 751 FAMILY MEDICAL		<input type="checkbox"/> PROCEDURE ACT/REVIEW OR
<input type="checkbox"/> CONDEMNATION	<input type="checkbox"/> DISABILITIES -	<input type="checkbox"/> ACTIONS	<input type="checkbox"/> 751 FAMILY MEDICAL		<input type="checkbox"/> APPEAL OF AGENCY DECISION
<input type="checkbox"/> 220 FORECLOSURE	<input type="checkbox"/> EMPLOYMENT		<input type="checkbox"/> 751 FAMILY MEDICAL		<input type="checkbox"/> 950 CONSTITUTIONALITY OF
<input type="checkbox"/> 230 RENT LEASE &	<input type="checkbox"/> 446 AMERICANS WITH		<input type="checkbox"/> 751 FAMILY MEDICAL		<input type="checkbox"/> STATE STATUTES
<input type="checkbox"/> EJECTMENT	<input type="checkbox"/> DISABILITIES -OTHER		<input type="checkbox"/> 751 FAMILY MEDICAL		
<input type="checkbox"/> 240 TORT TO LAND	<input type="checkbox"/> 448 EDUCATION		<input type="checkbox"/> 751 FAMILY MEDICAL		
<input type="checkbox"/> 245 TORT PRODUCT			<input type="checkbox"/> 751 FAMILY MEDICAL		
<input type="checkbox"/> LIABILITY			<input type="checkbox"/> 751 FAMILY MEDICAL		
<input type="checkbox"/> 290 ALL OTHER			<input type="checkbox"/> 751 FAMILY MEDICAL		
<input type="checkbox"/> REAL PROPERTY			<input type="checkbox"/> 751 FAMILY MEDICAL		

Check if demanded in complaint:

☒ CHECK IF THIS IS A CLASS ACTION
UNDER F.R.C.P. 23

DO YOU CLAIM THIS CASE IS RELATED TO A CIVIL CASE NOW PENDING IN S.D.N.Y.
AS DEFINED BY LOCAL RULE FOR DIVISION OF BUSINESS 13?
IF SO, STATE:

DEMAND \$ _____ OTHER _____ JUDGE _____ DOCKET NUMBER _____

Check YES only if demanded in complaint

JURY DEMAND: x YES NO

NOTE: You must also submit at the time of filing the Statement of Relatedness form (Form IH-32).

(PLACE AN *x* IN ONE BOX ONLY)**ORIGIN**

- ☒ 1 Original Proceeding
 ☐ 2 Removed from State Court
 ☐ 3 Remanded from Appellate Court
 ☐ 4 Reinstated or Reopened
 ☐ 5 Transferred from (Specify District)
 ☐ 6 Multidistrict Litigation (Transferred)
 ☐ 7 Appeal to District Judge from Magistrate Judge
- ☐ a. all parties represented
 ☐ b. At least one party is pro se.
 ☐ 8 Multidistrict Litigation (Direct File)

(PLACE AN *x* IN ONE BOX ONLY)**BASIS OF JURISDICTION****IF DIVERSITY, INDICATE CITIZENSHIP BELOW.**

- ☐ 1 U.S. PLAINTIFF
 ☐ 2 U.S. DEFENDANT
 ☒ 3 FEDERAL QUESTION (U.S. NOT A PARTY)
 ☐ 4 DIVERSITY

CITIZENSHIP OF PRINCIPAL PARTIES (FOR DIVERSITY CASES ONLY)

(Place an [X] in one box for Plaintiff and one box for Defendant)

CITIZEN OF THIS STATE	PTF [] 1	DEF [] 1	CITIZEN OR SUBJECT OF A FOREIGN COUNTRY	PTF DEF [] 3 [] 3	INCORPORATED and PRINCIPAL PLACE OF BUSINESS IN ANOTHER STATE	PTF DEF [] 5 [] 5
CITIZEN OF ANOTHER STATE	[] 2	[] 2	INCORPORATED or PRINCIPAL PLACE OF BUSINESS IN THIS STATE	[] 4 [] 4	FOREIGN NATION	[] 6 [] 6

PLAINTIFF(S) ADDRESS(ES) AND COUNTY(IES)

DEFENDANT(S) ADDRESS(ES) AND COUNTY(IES)

DEFENDANT(S) ADDRESS UNKNOWN

REPRESENTATION IS HEREBY MADE THAT, AT THIS TIME, I HAVE BEEN UNABLE, WITH REASONABLE DILIGENCE, TO ASCERTAIN THE RESIDENCE ADDRESSES OF THE FOLLOWING DEFENDANTS:

COURTHOUSE ASSIGNMENT

I have reviewed Rules 18(a) and 20(a) of the Rules for the Division of Business Among District Judges, Southern District of New York, and I hereby certify that this case should be assigned to the courthouse indicated below pursuant thereto.

Check one: THIS ACTION SHOULD BE ASSIGNED TO: ☐ WHITE PLAINS ☒ MANHATTAN

DATE 3/18/2025 /s/ James W. Quinn

SIGNATURE OF ATTORNEY OF RECORD

RECEIPT #

ADMITTED TO PRACTICE IN THIS DISTRICT

[] NO

[x] YES (DATE ADMITTED Mo. October Yr. 1971)

Attorney Bar Code # 1304500

Magistrate Judge is to be designated by the Clerk of the Court.

Magistrate Judge _____ is so designated.

Tammi M. Hellwig, Clerk of Court by _____ Deputy Clerk, Dated _____.

UNITED STATES DISTRICT COURT (NEW YORK SOUTHERN)

Clear Form

Save

Print

CIVIL COVER SHEET

(Continued)

Plaintiffs:

Vasek Pospisil, Nicholas Kyrgios, Anastasia Rodionova, Nicole Melichar-Martinez, Saisai Zheng, Sorana Cîrstea, John-Patrick Smith, Noah Rubin, Aldila Sutjiadi, Varvara Gracheva, Tennys Sandgren, and Reilly Opelka, on behalf of themselves and all others similarly situated, and the PTPA.